Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WASHINGTON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Miriam First name N Middle name Zamudio Medel	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7103	

Debtor 1 Miriam N Zamudio Medel

Case number (if known)

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)		☐ I have not used any business name or EINs. Business name(s)
	•	EINs	_	EINs
5.	Where you live	19 Arden Avenue		If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	_	Number, Street, City, State & ZIP Code
		Douglas County	-	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		PO Box 1914 Brewster, WA 98812 Number, P.O. Box, Street, City, State & ZIP Code	_	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:		Check one: ☐ Over the last 180 days before filing this petition, I
	Sum uptoy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Miriam N Zamudio	wedei				Case number (if known)		
Par	Tell the Court About	our Bank	ruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11						
	choosing to file under							
		☐ Chapt	ter 12					
		☐ Chapt	ter 13					
В.	How you will pay the fee	abo ord	out how your ler. If your	ou may pay. Typica	lly, if you are paying the fee you	with the clerk's office in your local court for more detail urself, you may pay with cash, cashier's check, or mone lf, your attorney may pay with a credit card or check wit		
		■ Ine	ed to pa	y the fee in install	nents. If you choose this option	n, sign and attach the Application for Individuals to Pay		
			-	ee in Installments (C	, in the second	only if you are filing for Chapter 7. By law, a judge may		
		but app	is not rec plies to yo	quired to, waive you our family size and y	r fee, and may do so only if you ou are unable to pay the fee in	in income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou all Form 103B) and file it with your petition.		
) .	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
	,		District		When	Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.						
	affiliate?							
			Debtor			Relationship to you		
			Debtor District		When	Relationship to you Case number, if known		
					When			
			District		When When	Case number, if known		
111.	affiliate? Do you rent your	■ No.	District Debtor District	line 12.		Case number, if known Relationship to you		
11.	affiliate?	■ No.	District Debtor District Go to	line 12.		Case number, if known Relationship to you Case number, if known		
11.	affiliate? Do you rent your	■ No.	District Debtor District Go to	line 12.	When	Case number, if known Relationship to you Case number, if known		

Deb	otor 1 Miriam N Zamudio	Medel			Case number (if known)			
ar	Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor			
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	S. Name and location of business					
	A sole proprietorship is a							
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	9			
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can s deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).						
	debtor? For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	· Have An	, Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any		riazarac	da i roperty or Air	y Froperty That Reeds infinediate Attention			
٦.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any		If immed	liate attention is				
	property that needs immediate attention?			why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			
_								

Debtor 1 Miriam N Zamudio Medel

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pa 5 of 50

Official Form 101 19-02250-FPC7

Debtor 1 Miriam N Zamudio Medel				Case number (if known)				
•ar	t 6: Answer These Questi	ons for Repo	orting Purposes					
16.	What kind of debts do you have?		re your debts primarily consuldividual primarily for a personal,	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an			
			No. Go to line 16b.					
			Yes. Go to line 17.					
				ily business debts? Business debts are debts that you incurred to obtain r investment or through the operation of the business or investment.				
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. St	ate the type of debts you owe th	nat are not consumer debts or business de	ebts			
17.	Are you filing under Chapter 7?	□ No. I a	nm not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	ar	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No					
	are paid that funds will be available for distribution to unsecured creditors?		l Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$0 - \$50, □ \$50,001 - ■ \$100,001 □ \$500,001	- \$100,000 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50, □ \$50,001 ■ \$100,001 □ \$500,001	- \$100,000 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
•ar	t 7: Sign Below							
	you	I have exam	ined this petition, and I declare	under penalty of perjury that the information	on provided is true and correct.			
				n aware that I may proceed, if eligible, uncavailable under each chapter, and I choos				
				ay or agree to pay someone who is not an ice required by 11 U.S.C. § 342(b).	attorney to help me fill out this			
		I request rel	ef in accordance with the chapte	er of title 11, United States Code, specified	d in this petition.			
		bankruptcy of and 3571.	case can result in fines up to \$25	cealing property, or obtaining money or pro 50,000, or imprisonment for up to 20 years				
			N Zamudio Medel Zamudio Medel Debtor 1	Signature of Debtor 2				
		Executed or	August 27, 2019 MM / DD / YYYY	Executed on MM / DI	D/YYYY			

Pg 6 of 50

Debtor 1	Miriam N Zamudio Medel	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	A. Kazemba Attorney for Debtor	Date	August 27, 2019 MM / DD / YYYY
	Kazemba 48049		
Overcast I	Law Offices, P.S.		
	atchee Ave. Suite 320 e, WA 98801		
	City, State & ZIP Code		
Contact phone	(509) 663-5588	Email address	dkazemba@overcastlaw.com
48049 WA			
Bar number & S	tate		

Fill	in this information to identify your case:				
	tor 1 Miriam N Zamudio Mede	al .			
Deb		Middle Name	Last Name		
	tor 2 use if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the: EAST	ERN DISTRICT OF	- WASHINGTON		
(if kno	e number			☐ Chec	k if this is an
				amen	ded filing
	icial Form 106Sum				
			d Certain Statistical Information		12/15
infor		then complete the	are filing together, both are equally responsible information on this form. If you are filing amen the box at the top of this page.		
Part	1: Summarize Your Assets				
				Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106 1a. Copy line 55, Total real estate, from Sch	A/B) nedule A/B		\$	115,000.00
	1b. Copy line 62, Total personal property, from	om Schedule A/B		\$	9,153.98
	1c. Copy line 63, Total of all property on Sch	nedule A/B		\$	124,153.98
Part	2: Summarize Your Liabilities				
					abilities It you owe
2.	Schedule D: Creditors Who Have Claims Se 2a. Copy the total you listed in Column A, A		(Official Form 106D) ne bottom of the last page of Part 1 of <i>Schedule D.</i> .	. \$	117,647.26
3.	Schedule E/F: Creditors Who Have Unsecu 3a. Copy the total claims from Part 1 (priori	red Claims (Official ty unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2 (nonp	riority unsecured cla	aims) from line 6j of Schedule E/F	\$	30,805.72
			Your total liabilitie		449.452.09
			Your total habilitie	s 🌣	148,452.98
Part	3: Summarize Your Income and Expen	ses			
4.	Schedule I: Your Income (Official Form 106l Copy your combined monthly income from li		l	\$	2,551.18
5.	Schedule J: Your Expenses (Official Form 1 Copy your monthly expenses from line 22c of the schedule J: Your Expenses from line 22c of the schedule J: Your Expenses (Official Form 1			\$	2,524.74
Part	4: Answer These Questions for Admin	istrative and Statis	stical Records		
6.	Are you filing for bankruptcy under Chap	oters 7, 11, or 13?			
o.			eck this box and submit this form to the court with y	our other sc	hedules.
_	■ Yes				
7.	What kind of debt do you have?				
			ebts are those "incurred by an individual primarily for statistical purposes. 28 U.S.C. § 159.	or a personal	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,054.48

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debto		on to identify yo	our case and th	is tiling	j.				
		Miriam N Zam	udio Medel						
D-64.		First Name	Middle	Name	Last Name				
Debto (Spous	_	First Name	Middle	Name	Last Name				
Jnite	d States Bankru	uptcy Court for th	e: EASTERN	DISTR	CT OF WASHINGTON				
_								-	
	number							Check if t amended	
Offi	cial Form	106A/B							
3c	hedule	A/B: Pro	pertv					12/15	
			<u> </u>	an asset	only once. If an asset fits in more than on	e category, lis	st the asset in	the category wh	ere you
	No. Go to Part 2.		able interest in a	ny resid	lence, building, land, or similar property?				
•	es. Where is the	, proporty .							
.1	19 Arden Ave	enue		What	t is the property? Check all that apply	5			
-:	Street address, if ava	ailable, or other descrip	otion	Duplex or multi-unit building the amount			duct secured claims or exemptions. Put of any secured claims on Schedule D:		
					Condominium or cooperative	Creditors V	rs Who Have Claims Secured by Property		
				_	Manufactured or mobile home				
	Brewster	WA S	98812-0000		Land	Current va entire prop		Current value portion you ov	
	City	State	ZIP Code		*** * 1 1 1 7	\$1 ′	15,000.00	\$115 ,	,000.00
_					Timeshare Other			our ownership ir	
-					has an interest in the property? Check one		e), if known.	ancy by the entir	elles, o
,									
					Debtor 1 only	Fee sim	ple		
_!	Douglas				Debtor 2 only	Fee sim	ple		
_!	Douglas County				Debtor 2 only Debtor 1 and Debtor 2 only	☐ Checl	c if this is com	munity property	,
_!					Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Checl (see in:	c if this is com	nunity property	,
_!				□ □ □ Othe	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Checl (see in:	c if this is com	nmunity property	,
_!				Othe	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite	Check (see in:	c if this is com structions)		,

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte	or 1 <u>M</u>	liriam N Zamudio Medel		Case number (if	known)	
3. Ca	rs, vans,	trucks, tractors, sport utility ve	hicles, motorcycles			
	No					
— ,						
_	100					
3.1	Make:	Infiniti	Who has an interest in the property? Check one			aims or exemptions. Put
0.1	Model:	G37 Sedan	Debtor 1 only			d claims on Schedule D: ms Secured by Property.
	Year:	2013	☐ Debtor 2 only			
	Approxin	nate mileage: 100000	Debtor 1 and Debtor 2 only	entire pr	alue of the operty?	Current value of the portion you own?
	Other inf	ormation:	☐ At least one of the debtors and another			
	I	on: 19 Arden Avenue, ter WA 98812	☐ Check if this is community property (see instructions)		\$8,750.00	\$8,750.00
			(see instructions)			
	Yes Id the do		n for all of your entries from Part 2, includin that number here			\$8,750.00
.pc	iges you	nave attached for 1 art 2. Write	Tract remove recommendation			<u> </u>
Part 3	Descri	be Your Personal and Household Ite	ems			
6. Ho	usehold	or have any legal or equitable in goods and furnishings Major appliances, furniture, linens	terest in any of the following items?		r r	Current value of the portion you own? On not deduct secured claims or exemptions.
	No	scribe	,			
	res. De	SCHDE				
		Household goo Location: 19 Ar	ds den Avenue, Brewster WA 98812			\$100.00
E)	No	Televisions and radios; audio, vide including cell phones, cameras, m scribe		rinters, scanners;	music collectio	ons; electronic devices
		Household elec Location: 19 Ar	den Avenue, Brewster WA 98812		-	\$50.00
E>	amples:	s of value Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	er art objects; stan	np, coin, or bas	seball card collections;
		scribe				
E>	amples:	for sports and hobbies Sports, photographic, exercise, ar musical instruments	nd other hobby equipment; bicycles, pool tables	, golf clubs, skis; o	canoes and ka	yaks; carpentry tools;
_		scribe				

Official Form 106A/B Schedule A/B: Property page 2

De	ebtor 1	Miriam N Zamudio Medel	Case number	(if known)
10.	■ No	ns oles: Pistols, rifles, shotguns, ammunition, and related equipment Describe	nt	
	□ No Î	s bles: Everyday clothes, furs, leather coats, designer wear, shoes Describe	s, accessories	
		Wearing apparel Location: 19 Arden Avenue, Brewste	r WA 98812	\$100.00
	■ No	y ples: Everyday jewelry, costume jewelry, engagement rings, wed Describe	dding rings, heirloom jewelry, watches	s, gems, gold, silver
13.	Examp	rm animals oles: Dogs, cats, birds, horses Describe		
		Household pet		\$1.00
15 Pa	No Yes. Add 1 for Pa	her personal and household items you did not already list, Give specific information the dollar value of all of your entries from Part 3, including a art 3. Write that number here	any entries for pages you have atta	ched \$251.00 Current value of the
				portion you own? Do not deduct secured claims or exemptions.
16.	■ No	oles: Money you have in your wallet, in your home, in a safe dep		our petition
		its of money bles: Checking, savings, or other financial accounts; certificates institutions. If you have multiple accounts with the same in		okerage houses, and other similar
		Institution	name:	
		Glacier I Savings	Family of Banks: Checking and	I \$152.98
	Exam _l ■ No	, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with brokerage firms, mo	ney market accounts	
19.	Non-pi	ublicly traded stock and interests in incorporated and uning renture	corporated businesses, including a	n interest in an LLC, partnership, and

40.00000 0000 00 4 57 10000040 00 10000040 45 40 00 00 00 40

Schedule A/B: Property

Official Form 106A/B

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page 3

Best Case Bankruptcy

Debtor	1 Miriam N Zamu	dio Medel	Case	e number (if known)	
ΠY	es. Give specific inform	ation about them Name of entity:		of ownership:	
Ne No ■ N	gotiable instruments incl n-negotiable instrument	lude personal checks, cashie s are those you cannot transf ation about them	ble and non-negotiable instruments rs' checks, promissory notes, and money fer to someone by signing or delivering the		
		Issuer name:			
Ex ■ N	lo	, ERISA, Keogh, 401(k), 403	(b), thrift savings accounts, or other pension	on or profit-sharing plans	S
ЦΥ	es. List each account se	eparately. Type of account:	Institution name:		
Yo Ex	amples: Agreements with	eposits you have made so the	at you may continue service or use from a blic utilities (electric, gas, water), telecomm		or others
			Institution name or individual:		
ЦΥ	es		institution name of individual.		
23. An		periodic payment of money t	o you, either for life or for a number of yea	rs)	
		r name and description.			
24. Inte			ified ABLE program, or under a qualifie	ed state tuition progran	n.
	lo				
ΠY	es Institu	ition name and description. S	Separately file the records of any interests.	11 U.S.C. § 521(c):	
	lo		er than anything listed in line 1), and rig	hts or powers exercisa	able for your benefit
ЦY	es. Give specific inform	ation about them			
Ex	amples: Internet domain	marks, trade secrets, and on names, websites, proceeds	other intellectual property from royalties and licensing agreements		
■ N	lo es. Give specific inform	ation about them			
	amples: Building permits	other general intangibles s, exclusive licenses, coopera	ative association holdings, liquor licenses,	professional licenses	
ΠY	es. Give specific inform	ation about them			
Money	or property owed to yo	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	refunds owed to you				·
■ N		ation about them, including w	hether you already filed the returns and th	e tax years	
Ex ■ N	•	, , , , , , , , , , , , , , , , , , , ,	port, child support, maintenance, divorce s	ettlement, property settl	lement
	benefits; unpaid		s, disability benefits, sick pay, vacation pa e else	y, workers' compensati	on, Social Security

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Official Form 106A/B

page 4

Best Case Bankruptcy

Schedule A/B: Property

De	btor 1	Miriam N Zamudio Medel	Case number (if known)	
	☐ Yes.	Give specific information		
31.		ets in insurance policies oles: Health, disability, or life insurance; health savings account (HSA); credi	t, homeowner's, or renter's insural	nce
	■ No			
	⊔ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance polone has died.	icy, or are currently entitled to rec	eive property because
	_	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
	☐ Yes.	Describe each claim		
	■ No	contingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
	■ No	Cive enseits information		
	□ res.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any entries for the definition of the description of the description of the definition of the		\$152.98
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related property?		
ı	No. Go	to Part 6.		
[☐ Yes. G	Go to line 38.		
Pa	rt 6: De:	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	Interest In.	
46.	Do you	own or have any legal or equitable interest in any farm- or commercia	I fishing-related property?	
		Go to Part 7.		
	☐ Yes	. Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not List Ab	ove	
53.	Examp	have other property of any kind you did not already list? bles: Season tickets, country club membership		
	■ No □ Yes.	Give specific information		
54	. Add t	he dollar value of all of your entries from Part 7. Write that number here	ə	\$0.00
		•		

Official Form 106A/B Schedule A/B: Property page 5

otor 1 Miriam N Zamudio Medel	C	ase number (if known)	
8: List the Totals of Each Part of this Form			
Part 1: Total real estate, line 2		<u> </u>	\$115,000.00
Part 2: Total vehicles, line 5	\$8,750.00		
Part 3: Total personal and household items, line 15	\$251.00		
Part 4: Total financial assets, line 36	\$152.98		
Part 5: Total business-related property, line 45	\$0.00		
Part 6: Total farm- and fishing-related property, line 52	\$0.00		
Part 7: Total other property not listed, line 54	+ \$0.00		
	8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2	8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2	8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2

\$9,153.98

63. Total of all property on Schedule A/B. Add line 55 + line 62

62. Total personal property. Add lines 56 through 61...

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\$124,153.98

\$9,153.98

Best Case Bankruptcy

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Fill in this inform	nation to identify your	case:		
Debtor 1	Miriam N Zamudi	o Medel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

	· · ·				
2	It 1: Identify the Property You Claim as E	xempt			
	Which set of exemptions are you claiming?	? Check one only, eve	n if yo	ur spouse is filing with you.	
	You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	19 Arden Avenue Brewster, WA	\$115,000.00		\$17,000.00	Wash. Rev. Code §§ 6.13.010,
	98812 Douglas County On title and obligation with parents Two lots: Contiguous property and Deed of Trust secures both lots Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	6.13.020, 6.13.030
	Household goods Location: 19 Arden Avenue, Brewster	\$100.00		\$100.00	Wash. Rev. Code § 6.15.010(1)(d)(i)
	WA 98812 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	0.13.010(1)(d)(l)
	Household electronics	\$50.00		\$50.00	Wash. Rev. Code §
	Location: 19 Arden Avenue, Brewster WA 98812 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	6.15.010(1)(c)
	Wearing apparel Location: 19 Arden Avenue, Brewster	\$100.00		\$100.00	Wash. Rev. Code § 6.15.010(1)(a)

Official Form 106C

WA 98812

Household pet

Line from Schedule A/B: 11.1

Line from Schedule A/B: 13.1

Schedule C: The Property You Claim as Exempt

\$1.00

page 1 of 2

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Best Case Bankruptcy

Wash. Rev. Code §

6.15.010(1)(d)(i)

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

ebtor 1	Miriam N Zamudio Medel			Case number (if known)		
	of description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	ecking: Glacier Family of Banks: ecking and Savings	\$152.98		\$152.98	Wash. Rev. Code § 6.15.010(1)(d)(ii)	
	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	5.15.0 10(1)(u)(u)	
	e you claiming a homestead exemption bject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	nt.)	
-	No	and but he avamention wi	thin 1	215 days before you filed this sage	2	
Ц	Yes. Did you acquire the property cover	ed by the exemption wi	u III 1	,215 days before you filed this case	!	
	□ No					
	☐ Yes					

Official Form 106C

Schedule C: The Property You Claim as Exempt

Fill in this inform	ation to identify you	case:			
Debtor 1	Miriam N Zamud	io Medel Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the:	EASTERN DISTRICT OF WASHINGTON			
Case number (if known)				_	if this is an ded filing
Official Form Schedule I		Who Have Claims Secure	d by Propert	y	12/15
		two married people are filing together, both are eut, number the entries, and attach it to this form. C			
1. Do any creditors h	nave claims secured by	your property?			
☐ No. Check	this box and submit th	is form to the court with your other schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in	all of the information b	elow.			
Part 1: List All	Secured Claims				
2. List all secured c	laims. If a creditor has m	ore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 George J.	Chapman	Describe the property that secures the claim:	\$98,000.00	\$115,000.00	\$0.00
Title, LLC PO Box 21	-	19 Arden Avenue Brewster, WA 98812 Douglas County On title and obligation with parents Two lots: Contiguous property and Deed of Trust secures both lots As of the date you file, the claim is: Check all that apply.			
Omak, WA	City, State & Zip Code	Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or secar loan)	cured		
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla		Other (including a right to offset)			
Date debt was incu	October 12, rred 2018	Last 4 digits of account number			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Miriam N Za	Middle N		Case number (if known)		
2.2 Les Schwab Tire	Cent	Describe the property that secures the claim:	<u>\$788.26</u>	\$0.00	\$788.20
Creditor's Name		Tires; battery			
Attn: Bankruptcy	,				
Po Box 5350	,	As of the date you file, the claim is: Check all that			
Bend, OR 97708		apply. □ Contingent			
Number, Street, City, State	e & Zin Code	☐ Unliquidated			
,,,		☐ Disputed			
Vho owes the debt? Che	ck one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 on	dv	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtor	•	☐ Judgment lien from a lawsuit			
_		<u> </u>			
Check if this claim relat community debt	es to a	Other (including a right to offset)			
	Opened 18/17 Last				
A	Active				
Date debt was incurred _5	/24/19	Last 4 digits of account number 4313	· · · · · · · · · · · · · · · · · · ·		
Toyota Financial	ı				
Services	ı	Describe the property that secures the claim:	\$18,859.00	\$8,750.00	\$10,109.0
Creditor's Name		2013 Infiniti G37 Sedan 100000			
		miles			
		Location: 19 Arden Avenue, Brewster WA 98812			
DO D 0000		As of the date you file, the claim is: Check all that			
PO Box 8026	E0400	apply.			
Cedar Rapids, IA		Contingent			
Number, Street, City, State	e & Zip Code	Unliquidated			
		Disputed			
Vho owes the debt? Che	ck one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 on	ily	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtor	s and another	☐ Judgment lien from a lawsuit			
Check if this claim relat community debt	es to a	Other (including a right to offset)			
	ebruary 018	Last 4 digits of account number 0001			
Add the dollar value of vo	our entries in C	olumn A on this page. Write that number here:	\$117,647.20	6	
If this is the last page of		the dollar value totals from all pages.	\$117,647.20		
			φ117,047.20	J	
Write that number here:					

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in	this information to identify your c	ase:				
Debtor						
	First Name	Middle Name	Last Name	_		
Debtor		Middle Nome	Loot Name			
(Spouse	if, filing) First Name	Middle Name	Last Name			
United	States Bankruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON			
Case r	number					
(if known					☐ Che	eck if this is an
					am	ended filing
Ott: -:						
	ial Form 106E/F					40/45
	edule E/F: Creditors W					12/15
eft. Atta	le D: Creditors Who Have Claims Secu ach the Continuation Page to this page and case number (if known).	e. If you have no informatio				
	any creditors have priority unsecured					
_	No. Go to Part 2.					
	Yes.					
Part 2		/ Unsecured Claims				
	any creditors have nonpriority unsec					
_	No. You have nothing to report in this pa		urt with your other sch	odulos		
_		irt. Submit this form to the co	urt with your other schi	euules.		
	Yes.					
uns tha	at all of your nonpriority unsecured classecured claim, list the creditor separately none creditor holds a particular claim, list t 2.	for each claim. For each clai	m listed, identify what	type of claim it is. Do not list cla	aims already includ	ded in Part 1. If more
					1	Total claim
4.1	Armada Cor	Last 4 digits	of account number	4742		\$10,349.00
	Nonpriority Creditor's Name				_	• •
	Attn: Bankruptcy Po Box 709	When was ti	he debt incurred?	Opened 8/02/16		
	Wenatchee, WA 98807					
	Number Street City State Zip Code	As of the da	te you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Continger	nt			
	Debtor 2 only	☐ Unliquida	ted			
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and ano		IPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a comm	•				
	debt Is the claim subject to offset?	☐ Obligation report as price		ration agreement or divorce th	at you did not	
	No	<u>-</u> .	•	g plans, and other similar debi	·s	
		·	•			
	☐ Yes	Other Sn	Society Collection	Agent for Three Rivers	s nospitai	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 3

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51072

Debto	or 1 Miriam N Zamudio Medel		Case number (if known)					
4.2	Armada Corp.	Last 4 digits of account number	4742	\$19,701.03				
	Nonpriority Creditor's Name C/O Carlson & McMahon PLLC 715 Washington Street	When was the debt incurred?		¥ 13,1 2 132				
	Wenatchee, WA 98801 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Douglas Co	ounty District Court CY19-264					
4.3	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	7794	\$118.00				
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 07/17 Last Active 6/26/19					
	Number Street City State Zip Code Who incurred the debt? Check one.	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin						
	□Yes	Other. Specify Charge Acc	count					
4.4	Family Health Centers	Last 4 digits of account number	7193	\$330.84				
	Nonpriority Creditor's Name PO Box 1340 Okanagan WA 08840 4340	When was the debt incurred?	Initial date July 26, 2019					
	Okanogan, WA 98840-1340 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only							
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another	-	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical						

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 3

Progressive Leasing	Last 4 digits of account number 4703	\$306.8
Nonpriority Creditor's Name		
256 West Data Dr.	When was the debt incurred?	
Draper, UT 84020		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Revolving Account	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 30,805.72
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 30,805.72

Fill in this infor				
Debtor 1	Miriam N Zamudi	o Medel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F WASHINGTON	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Progressive Leasing 256 West Data Dr. Draper, UT 84020 Lease for mattress purchased at Big Lots

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this inf	ormation to identify your	case:			
Debtor 1	Miriam N Zamudi	o Medel			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT (OF WASHINGTON		
Case number					
(if known)					Check if this is an amended filing
Official E	Form 106H				
	le H: Your Cod	ehtors			12/15
Concaa	10 11. 10di 00d				12/13
fill it out, and your name an 1. Do you		boxes on the left. Attac . Answer every question	h the Additional Page to n.	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
□ No					
Yes					
	the last 8 years, have you California, Idaho, Louisiana,				states and territories include
■ No. Go	to line 3.				
☐ Yes. D	id your spouse, former spou	use, or legal equivalent liv	ve with you at the time?		
in line 2 a	again as a codebtor only i SD), Schedule E/F (Official	f that person is a guarai	ntor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and Zl	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
PO	resa Medel and Hector Box 1914 ewster, WA 98812	Villegas		■ Schedule D, lin □ Schedule E/F, □ Schedule G George J. Chapn	line

Schedule H: Your Codebtors

E:II											
	in this information to identify your captor 1 Miriam N Za	mudio Medel									
Deb	otor 2 use, if filing)	madio model				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF WAS	HINGTON							
Case number (If known)							Check if this is: An amended filing A supplement showing postpetition chapter				
\bigcirc	fficial Form 106l								ollowing date:		
	chedule I: Your Inc	omo					MM / DD/ Y	YYY		12/15	
Be a supp sportate	ns complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. (sible. If two married peo are married and not filir r spouse is not filing wi	ng jointly th you, d	, and your s _i lo not includ	oouse i	s livin nation	g with you, incl about your spo	ude inforr ouse. If m	mation about ore space is	ible for your needed,	
1.	Fill in your employment information.		Debtor	· 1			Debtor 2	or non-fi	iling spouse		
	If you have more than one job, attach a separate page with information about additional employers.		■ Emp	■ Employed			☐ Empl	☐ Employed			
		Employment status*	☐ Not	employed			☐ Not e	mployed			
		Occupation	Medic	al Assistan	t						
	Include part-time, seasonal, or self-employed work.	Employer's name	Family	y Health Ce	nters						
	Occupation may include student or homemaker, if it applies.	Employer's address		ox 1340 ogan, WA 9	8840						
		How long employed th	nere?	3 years							
				*See Atta	chment	for A	dditional Emplo	yment Inf	ormation		
Par	Give Details About Mon	thly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	ou have	nothing to rep	ort for a	any lin	e, write \$0 in the	space. In	clude your nor	n-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine th	e information	for all e	mploy	ers for that perso	n on the li	ines below. If y	ou need	
						F	For Debtor 1		btor 2 or ing spouse		
2.	List monthly gross wages, salar deductions). If not paid monthly, or				2.	\$_	2,900.80	\$	N/A		
3.	Estimate and list monthly overti	me pay.			3.	+\$_	0.00	+\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.			4.	\$_	2,900.80	\$	N/A		
								•			

Official Form 106I Schedule I: Your Income page 1

				F	or Debtor 1			r Debtor n-filing s		se	
	Сору	y line 4 here	4.	\$	2,900	.80	\$	9	•	I/A	
5.	l ist s	all payroll deductions:									
J.	5a.	Tax, Medicare, and Social Security deductions	50	\$	500	26	\$		N.	1/ A	
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.		502	.00	\$_			<u> /A</u> /A	
	5c.	Voluntary contributions for retirement plans	5c.			.00	\$_			/ <u>A</u>	
	5d.	Required repayments of retirement fund loans	5d.			.00	\$_			/ <u>/</u>	
	5e.	Insurance	5e.			.00	\$			/ <u>/</u> A	
	5f.	Domestic support obligations	5f.	\$.00	\$			/A	
	5g.	Union dues	5g.	\$.00	\$			/A	
	5h.	Other deductions. Specify:	5h.	+ \$	0	.00	+ \$		N	I/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	502	.36	\$		N	I/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,398	.44	\$_		N	I/A	
8.	8a. 8b. 8c.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8a. 8b.	\$	0.	.00	\$_ \$_ \$_		N N	I/A I/A	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.			.00 .00	\$_ \$			/A /A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.	.00	\$_			I/A_	
	8g.	Pension or retirement income	8g.	\$	0	.00	\$_		N	I/A	
	8h.	Other monthly income. Specify: employer	8h.	+ \$	152	.74	+ \$		N	I/A	
			_	Γ.							
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	152	.74	\$_			N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,551.18	+ \$		N/A	= \$		2,551.18
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	deper				•	Schedule	<i>∃.</i> +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines						e. 12.	\$_		2,551.18
										nbine nthly	ed income
13.	Do ye	ou expect an increase or decrease within the year after you file this form? No. Yes. Explain:	?								

Official Form 106l Schedule I: Your Income page 2

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation	General Labor	·
Name of Employer	Lakeshore Inn	
How long employed	1 month	
Address of Employer	PO Box 25	
. ,	Pateros, WA 98846	

Official Form 106l Schedule I: Your Income page 3

	in this informati	Cara ta idaa (faaa									
FIII	in this informat	tion to identify yo	our case:								
Deb	tor 1	Miriam N Zaı	mudio Me	edel		Check if this is:					
Dob	otor 2							n amended filing	vina naatnatitian aha	ntor	
	ouse, if filing)								ving postpetition cha the following date:	ipiei	
Unit	ed States Bankru	uptcy Court for the	: EASTE	RN DISTRICT OF WASH	INGTON		M	IM / DD / YYYY			
Cas	e number										
(If kı	nown)										
\bigcirc	fficial Fo	rm 106 l									
	fficial Fo										
		J: Your								12/15	
info	ormation. If me		eded, atta	If two married people a ch another sheet to this n.							
Par	t 1: Descri	ibe Your House	hold								
1.	Is this a join	t case?									
	■ No. Go to	line 2.									
	☐ Yes. Doe s	s Debtor 2 live i	in a separa	ate household?							
		o									
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	hold of D	ebto	r 2.			
2.	Do you have	e dependents?	■ No								
	Do not list De	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation			Dependent's age	Does dependent live with you?		
				odon dopondona	Dobto: 1 of Dobto:	_		ugo	_		
	Do not state dependents r								□ No □ Yes		
	dependents i	names.							□ res □ No		
									□ Yes		
									□ No		
									☐ Yes		
									□ No		
									☐ Yes		
3.	expenses of	enses include people other to your depende	han 📕	No Yes							
	yoursen and	a your depende	iito:								
		ate Your Ongoi		y Expenses uptcy filing date unless y	vou are using this fe	.rm 00 0	ou n	nlament in a Cha	entor 12 ages to rer	ort	
exp				y is filed. If this is a supp							
				government assistance							
	value of such ficial Form 10		d have inc	luded it on Schedule I:	Your Income			Your expe	enses		
(011	ilciai i oi ili io	01.)									
4.		r home owners		ses for your residence. I r lot.	Include first mortgage	4.	\$		400.00		
	If not includ	ed in line 4:									
	4a. Real e	state taxes				4a.	\$		0.00		
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$		168.10		
				pkeep expenses		4c.			0.00		
5.		owner's associat		dominium dues o ur residence, such as ho	ome equity loops	4d.	\$ \$		0.00		
J.	Additional II	rauge payille	ioi yu	an recidence, such as He	mic equity leatis	٥.	Ψ		0.00		

Debtor 1	Miriam N Zamudio Medel	Case num	ber (if known)	
S. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	45.00
6b.	Water, sewer, garbage collection	6b.	· -	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	126.91
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies		\$	300.00
	dcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	55.00
	sonal care products and services	10.	\$	55.00
	lical and dental expenses	11.	\$	91.16
	nsportation. Include gas, maintenance, bus or train fare.		·	
	not include car payments.	12.	\$	200.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
1. Cha	ritable contributions and religious donations	14.	\$	39.00
5. Ins i	ırance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	Vehicle insurance	15c.	\$	325.79
15d	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	, , ,	16.	\$	0.00
7. Inst	allment or lease payments:			<u> </u>
17a	Car payments for Vehicle 1	17a.	\$	482.35
17b	Car payments for Vehicle 2	17b.	\$	0.00
17c	Other. Specify: Microsoft Office	17c.	\$	7.56
17d	Other. Specify: Progressive Lease	17d.	\$	43.87
	Les Schwab		\$	75.00
3. Yo u	r payments of alimony, maintenance, and support that you did not report as		·	
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	cify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	our Income.	
20a	. Mortgages on other property	20a.	\$	0.00
20b	. Real estate taxes	20b.	\$	0.00
20c	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
l. Oth	er: Specify: Pets	21.	+\$	60.00
	culate your monthly expenses			0 = 0 4 = 1
	Add lines 4 through 21.		\$	2,524.74
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	2,524.74
اوی ک	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2 554 40
	Copy fine 12 (your combined monthly income) from Schedule 1. Copy your monthly expenses from line 22c above.	23a. 23b.	·	2,551.18
23 D	. Copy your monthly expenses normalie 220 above.	230.	-φ	2,524.74
230	Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c.	\$	26.44
	The result is your monthly nethicome.		<u> </u>	
For mod	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you iffication to the terms of your mortgage?			or decrease because of a
1	No			
	'es. Explain here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	Miriam N Zamudi				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON		
Case number					
(if known)					Check if this is an amended filing
Official Form		n Individual	Debtor's Sch	adulas	4045
Deciara	tion About a	<u> </u>	Depior 5 Scri	<u>leuules</u>	12/15
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumn	nary and schedules filed v	with this declaration	on and
X /s/ Mir	iam N Zamudio Mede	A	X		
	n N Zamudio Medel ure of Debtor 1		Signature of De	ebtor 2	
Date _	August 27, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

				·			
Fill	in this infor	mation to identify you	r case:				
Deb	otor 1	Miriam N Zamud	Middle Name		Last Name		
Deb	otor 2	riistivame	Wildle Name		Last Name		
(Spot	use if, filing)	First Name	Middle Name		Last Name		
Unit	ed States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F WAS	HINGTON		
Cas (if kno	e number _ own)						Check if this is an amended filing
Sta Be a infor	s complete mation. If n	and accurate as possi	attach a separate sheet to	are fili	ng together, both are	ankruptcy equally responsible for sup additional pages, write yo	
Par	-		rital Status and Where Yo	u Lived	d Before		
1.	What is you	r current marital statu	is?				
	☐ Married■ Not ma						
2.	During the I	ast 3 years have you	lived anywhere other than	n whare	a vou live now?		
	During the i	ast o years, nave you	inved any where outlet that		you live now.		
	□ No ■ Yes. Lis	st all of the places you I	ived in the last 3 years. Do	not incl	ude where you live now	ı.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	408 Hwy 1 Sp 1 Bridgepo	173 rt, WA 98813	From-To: 2012 to Octo 2018	ber	☐ Same as Debtor 1	l	☐ Same as Debtor 1 From-To:
	es and territor	ries include Arizona, Ca		levada,	New Mexico, Puerto Ri	ity property state or territor ico, Texas, Washington and V	
Part	Expla	in the Sources of You	r Income				
	Fill in the tot	al amount of income yo	nployment or from operat u received from all jobs and have income that you recei	l all bus	inesses, including part-		ndar years?
	□ No						
	_	Il in the details.					
			Debtor 1			Debtor 2	
			Sources of income	Gr	oss income	Sources of income	Gross income
			Check all that apply.	(be	efore deductions and clusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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				Debtor 1			Debtor 2					
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of Check all th		Gross income (before deductions and exclusions)			
the date you tiled for hankruntey:				■ Wages, commissions, bonuses, tips		\$24,566.62	☐ Wages, of bonuses, tip	commissions,				
				☐ Operating a business			☐ Operatin	g a business				
	· last calen nuary 1 to	dar year: December :	31, 2018)	■ Wages, commissions, bonuses, tips		\$37,230.00	☐ Wages, of bonuses, tip	commissions, s				
				☐ Operating a business			☐ Operatin	g a business				
		dar year bei December :		■ Wages, commissions, bonuses, tips		\$32,788.00	☐ Wages, of bonuses, tip	commissions,				
				☐ Operating a business			☐ Operatin	g a business				
	and other winnings. List each s	public benef If you are fili	it payments; png a joint cas	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separa	rest; div you rece	idends; money collectived together, list it	cted from lawsu only once unde	its; royalties; ar r Debtor 1.				
				Debtor 1			Debtor 2					
				Sources of income Describe below.	eacl (befo	ss income from n source ore deductions and usions)	Sources of Describe be		Gross income (before deductions and exclusions)			
Par	t 3: List	Certain Pa	yments You	Made Before You Filed for	Bankru	ptcy						
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. ■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.											
	. 55.	During the	90 days befo	efore you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
		■ No. □ Yes	include payı	each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not yments for domestic support obligations, such as child support and alimony. Also, do not include payments to r this bankruptcy case.								
	Creditor's Name and Address			Dates of payme	ent	Total amount paid	Amount yo		payment for			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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☐ Yes

Official Form 107

Nο

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

court-appointed receiver, a custodian, or another official?

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No								
	Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No								
	Yes. Fill in the details.								
	Name of trust	Description and value of the property tran			sferred	Date Transfer was made			
						maue			
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Sto	orage Unit	S				
20.	Within 1 year before you filed for bankruptcy	y, were any financial ac	counts or instru	uments he	ld in your name, or for yo	our benefit, closed,			
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	unt or Date account was closed, sold, moved, or transferred		Last balance before closing of transfe			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No								
	Yes. Fill in the details.								
		What also be described	1- 110	D	the contents	D (111			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?			
	State and Lit Godej								
Pa	Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No □ Yes. Fill in the details.								
	Owner's Name	Where is the prop	ortu?	Doscribo	the property	Value			
	Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	value			
Pa	tt 10: Give Details About Environmental Info	ormation							
-or	the nurnose of Part 10, the following definition	ons anniv							

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Official Form 107

Best Case Bankruptcy

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Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.									
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.									
Rep	ort a	II notices, releases, and proceedings th	hat you know about, regardless of when	they o	occurred.					
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
		No Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?									
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No □ Yes. Fill in the details.									
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	e of the case	Status of the case				
Par	t 11:	Give Details About Your Business or	r Connections to Any Business							
27.	Witl	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	No. None of the above applies. Go to Part 12.									
	Yes. Check all that apply above and fill in the details below for each business.									
	Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.					
			Name of accountant or bookkeeper		Dates business existed					
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.									
		No								
	Name Address (Number, Street, City, State and ZIP Code)		Date Issued							

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Best Case Bankruptcy

Debtor 1 Miriam N	N Zamudio Medel	Case number (if known)
	se can result in fines up to \$2	alse statement, concealing property, or obtaining money or property by fraud in connection 250,000, or imprisonment for up to 20 years, or both.
/s/ Miriam N Zamu	ıdio Medel	
Miriam N Zamudio Signature of Debtor		Signature of Debtor 2
Date August 27,	2019	Date
Did you attach additi	onal pages to Your Statemen	nt of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
☐ Yes		
Did you pay or agree	to pay someone who is not a	an attorney to help you fill out bankruptcy forms?
■ No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Fill in this inform	ation to identify your o	case:		
Debtor 1	Miriam N Zamudio	Medel Middle Name	Last Name	_
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ban	kruptcy Court for the:	EASTERN DISTRI	ICT OF WASHINGTON	_
Case number(if known)				☐ Check if this is an amended filing
Official For Statemen		n for Indiv	iduals Filing Under Cha	pter 7 12/15
	ridual filing under char claims secured by you		out this form if:	
You must file this	er is earlier, unless the	ithin 30 days after y	ot expired. you file your bankruptcy petition or by the d e time for cause. You must also send copies	
	ople are filing together I date the form.	in a joint case, bot	th are equally responsible for supplying cor	rect information. Both debtors must
	nd accurate as possibl ur name and case num		needed, attach a separate sheet to this form	n. On the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
For any credito information bel		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Pro	operty (Official Form 106D), fill in the
Identify the cree	ditor and the property th	nat is collateral	What do you intend to do with the propert secures a debt?	y that Did you claim the property as exempt on Schedule C?
Creditor's Ge name:	eorge J. Chapman		☐ Surrender the property.	□ No
Description of	19 Arden Avenue E	Rrewster WA	Retain the property and redeem it. Retain the property and enter into a	■ Yes
property	98812 Douglas Co On title and obligat	unty	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	parents			
	Two lots: Contiguo and Deed of Trust : lots		Retain and pay	
Creditor's Le	es Schwab Tire Cent		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	Tires; battery		Retain the property and enter into a	■ Yes
property securing debt:	THES, DAILETY		Reaffirmation Agreement. Retain the property and [explain]:	
Creditor's To	oyota Financial Serv	ices	☐ Surrender the property.	■ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

De	btor 1 Miria	m N Zamudio Medel	Case number (#	known)
ı	name:		☐ Retain the property and redeem it.	☐ Yes
ı	Description of property securing debt:	2013 Infiniti G37 Sedan 100000 miles Location: 19 Arden Avenue, Brewster WA 98812	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	
For in tl	any unexpire	n below. Do not list real estate leases. U	d in Schedule G: Executory Contracts and Und nexpired leases are leases that are still in effe the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
De	scribe your ur	nexpired personal property leases		Will the lease be assumed?
Les	ssor's name:	Progressive Leasing		□ No
Pro	scription of leapperty:		I at Big Lots	■ Yes
Unc	der penalty of perty that is s		ny intention about any property of my estate th	nat secures a debt and any personal
	Miriam N Z Signature of	Zamudio Medel Debtor 1	Signature of Debtor 2	
	Date A	ugust 27, 2019	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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=::::::::::::::::::::::::::::::::::::::						
Fill in th	is information to identify your case:			eck one box only as o 2A-1Supp:	directed in this form and	in Form
Debtor	Miriam N Zamudio Medel			za roupp.		
Debtor 2 (Spouse, i			'	1. There is no pres	sumption of abuse	
United S	States Bankruptcy Court for the: Eastern District of	Washington			to determine if a presur	•
Case nu					made under <i>Chapter</i> 7. ficial Form 122A-2).	Means Test
(if known)				☐ 3. The Means Tes	t does not apply now be	ecause of
				qualified militar	y service but it could ap	oply later.
				☐ Check if this is a	an amended filing	
Offic	al Form 122A - 1					
Chap	oter 7 Statement of Your Cur	rent Mo	nthly Inc	ome		12/15
attach a s case nun	mplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to water (if known). If you believe that you are exempted from a military service, complete and file Statement of Exemp	hich the additio n a presumption	nal information a of abuse becau	applies. On the top of a se you do not have pri	nny additional pages, writ marily consumer debts o	te your name and or because of
1. W I	nat is your marital and filing status? Check one on	 ly.				
	Not married. Fill out Column A, lines 2-11.					
	Married and your spouse is filing with you. Fill ou	t both Columns	s A and B, lines	2-11.		
_	Married and your spouse is NOT filing with you.					
	☐ Living in the same household and are not lega	lly separated.	Fill out both Co	lumns A and B, lines	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are left living apart for reasons that do not include evading.	egally separate	d under nonban	kruptcy law that appl	ies or that you and your	
101(1 the 6	the average monthly income that you received from all s 0A). For example, if you are filing on September 15, the 6-m months, add the income for all 6 months and divide the total es own the same rental property, put the income from that pu	onth period would by 6. Fill in the re	d be March 1 throus	ugh August 31. If the am de any income amount n	ount of your monthly incon nore than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ur gross wages, salary, tips, bonuses, overtime, a	and commissi	ons (before all	\$ 3,054.48	\$	
3. Al i	imony and maintenance payments. Do not include following B is filled in.	payments from	a spouse if	\$ 0.00	\$	
4. All of fro	amounts from any source which are regularly pa you or your dependents, including child support. m an unmarried partner, members of your household d roommates. Include regular contributions from a sp ed in. Do not include payments you listed on line 3.	Include regula , your depende	r contributions ents, parents,	\$ 0.00	\$	
5. Ne	t income from operating a business, profession,					
			otor 1			
	oss receipts (before all deductions)	\$ 0.00				
	dinary and necessary operating expenses	-\$ 0.00	Conv. boro	\$ 0.00	¢	
	t monthly income from a business, profession, or farr	n \$	Copy here ->	\$ 0.00	\$	
6. Ne	t income from rental and other real property	Dei	otor 1			
	one receipts (before all deductions)	\$ 0.00				
	oss receipts (before all deductions) dinary and necessary operating expenses	-\$ 0.00				
	t monthly income from rental or other real property	*	Copy here ->	\$ 0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

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7. Interest, dividends, and royalties

Debtor 1

			Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. Unemployment compensation			\$	0.00	\$		
Do not enter the amount if you contend that the amo the Social Security Act. Instead, list it here:	unt received was a ber	nefit under					
For youFor your spouse	\$	0.00					
For your spouse	\$						
9. Pension or retirement income. Do not include any benefit under the Social Security Act.			\$	0.00	\$		
10. Income from all other sources not listed above. So not include any benefits received under the Social received as a victim of a war crime, a crime against I domestic terrorism. If necessary, list other sources of total below.	al Security Act or paym humanity, or internatior in a separate page and	ents nal or I put the	\$	0.00	\$		
•			φ		Φ		
Total amounts from congrets pages, if any			φ	0.00	\$		
Total amounts from separate pages, if any.		+	\$	0.00	Ф		
11. Calculate your total current monthly income. Add each column. Then add the total for Column A to the		\$	3,054.48	+		=\$	3,054.48
				J L			urrent monthly
Part 2: Determine Whether the Means Test Applie	s to You					income	
Determine the meane restrippine							
12. Calculate your current monthly income for the year	ear. Follow these steps	:					
12a. Copy your total current monthly income from lin	ne 11		Сору	line 11 l	nere=>	\$	3,054.48
Multiply by 12 (the number of months in a year)						x 1	
12b. The result is your annual income for this part of	the form				12b	· \$3	6,653.76
13. Calculate the median family income that applies	to you. Follow these s	teps:					
Fill in the state in which you live.	WA						
Fill in the number of people in your household.	1						1
Fill in the median family income for your state and si. To find a list of applicable median income amounts, for this form. This list may also be available at the ba	go online using the link	specified	in the separa			\$6	4,079.00
•							
14. How do the lines compare? 14a. Line 12b is less than or equal to line 13.	. On the top of page 1,		κ1, There is n	o presum	ption of abus	e.	
14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to	, , ,	check box		,	•		2A-2.
14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3.	, , ,	check box		,	•		2A-2.
14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below	p of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	
14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perje	p of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	
14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjut	p of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	
14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perje	p of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	
14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjuti	p of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	
14a. Line 12b is less than or equal to line 13. Go to Part 3. 14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjutation of the period o	up of page 1, check box	check box	resumption of	abuse is	determined by	/ Form 12	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2019 to 07/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Family Health Centers

Income by Month:

6 Months Ago:	02/2019	\$2,891.74
5 Months Ago:	03/2019	\$3,056.54
4 Months Ago:	04/2019	\$2,914.40
3 Months Ago:	05/2019	\$2,934.79
2 Months Ago:	06/2019	\$2,961.99
Last Month:	07/2019	\$2,914.40
	Average per month:	\$2,945.64

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Lakeshore Inn

Income by Month:

6 Months Ago:	02/2019	\$0.00
5 Months Ago:	03/2019	\$0.00
4 Months Ago:	04/2019	\$0.00
3 Months Ago:	05/2019	\$0.00
2 Months Ago:	06/2019	\$156.00
Last Month:	07/2019	\$497.04
	Average per month:	\$108.84

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquid	ation
\$24	5 filing fee	
\$7	5 administ	rative fee
+ \$1	5 trustee s	<u>urcharge</u>
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Eastern District of Washington

In ro	Miriam N Zamudio Medel	tern District of Washington	Case No.		
In re	William N Zamudio Wedei	Debtor(s)	Case No. Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTORI	NEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filbe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or	to
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received	d	. \$	1,200.00	
	Balance Due			0.00	
2. ′	The source of the compensation paid to me was:				
	\blacksquare Debtor \square Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person un	nless they are memb	pers and associates of my law f	irm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				4
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy c	ase, including:	
1	a. Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, stoc. Representation of the debtor at the meeting of credit. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	atement of affairs and plan which n itors and confirmation hearing, and reduce to market value; exen ions as needed; preparation a	nay be required; any adjourned hear nption planning;	rings thereof;	
5.	By agreement with the debtor(s), the above-disclosed to Representation of the debtors in any dany other adversary proceeding.			es, relief from stay actions	or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a ankruptcy proceeding.	any agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in	l
Α	ugust 27, 2019	/s/ David A. Kazem	ba		
D	ate	David A. Kazemba Signature of Attorney	48049		
		Overcast Law Office	ces, P.S.		
		23 S. Wenatchee A	ve. Suite 320		
		Wenatchee, WA 98			
		(509) 663-5588 Fa dkazemba@overca		•	
		Name of law firm			

United States Bankruptcy Court Eastern District of Washington

In re Miriam N Zamudio Medel		Case No.	
	Debtor(s)	Chapter	7
VE	RIFICATION OF CREDITOR	MATRIX	
he above-named Debtor hereby verifi	es that the attached list of creditors is true and o	correct to the best of	of his/her knowledge.
Date: August 27, 2019	/s/ Miriam N Zamudio Medel		
	Miriam N Zamudio Medel		

Signature of Debtor

Miriam N Zamudio Medel PO Box 1914 Brewster, WA 98812

David A. Kazemba Overcast Law Offices, P.S. 23 S. Wenatchee Ave. Suite 320 Wenatchee, WA 98801

Armada Cor Attn: Bankruptcy Po Box 709 Wenatchee, WA 98807

Armada Corp. C/O Carlson & McMahon PLLC 715 Washington Street Wenatchee, WA 98801

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Family Health Centers PO Box 1340 Okanogan, WA 98840-1340

George J. Chapman C/O Inland Professional Title, LLC PO Box 2118 Omak, WA 98841

Les Schwab Tire Cent Attn: Bankruptcy Po Box 5350 Bend, OR 97708 Progressive Leasing 256 West Data Dr. Draper, UT 84020

Teresa Medel and Hector Villegas PO Box 1914 Brewster, WA 98812

Toyota Financial Services PO Box 8026 Cedar Rapids, IA 52408